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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/551,538
Filing Date	September 14, 2005
First Named Inventor	Hans Vondracek
Art Unit	3725
Examiner Name	
Attorney Docket Number	103020.5995/US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
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Date	February 4, 2008	Telephone	+49-201-106-53279

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of ___ forms are submitted.

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